Select any areas that presented compliance issues and

Licensing Specialist:	explain briefly:
Redentora Perez	\square NO VIOLATIONS NOTED
Program Name:	☐ Physical Facilities
Westwood Y at Metcalf	Click here to enter text.
PID:	☐ Health, Safety & Nutrition
3218	Click here to enter text.
Date of Visit:	\square Routine Care of Children
9/18/2019	Click or tap here to enter text.
License status at time of visit:	☐ Enrollment & Staffing
Regular	Click here to enter text.
What type of visit was this?	\square Staff Qualifications & ongoing PD
Monitoring - Regular License	Click here to enter text.
If on probation select reason:	☑ Background checks & Clearances
Choose an item.	Click here to enter text.
Would you like to schedule a time for follow-up on this	□ Administration
visit? ☐ YES ⊠ NO	Two staffs need DCYF' clearance
	Two staffs need fingerprint
	A staff needs 5-year background clearances
Additional notes:	CPR and First aid certificates for at least two workers
Click here to enter text.	☐ Learning and Development
	Click here to enter text.
	List your recommended steps for follow up:
	Licensing specialist follow-up